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#### Section 1. Purpose

The purpose of this specification package is to provide the requirements and conditions for filing IRS Form 8362, the Currency Transaction Report by Casinos (CTRC) information on magnetic media. For the purpose of these specifications, magnetic cartridges and 3-1/2 inch diskettes will be referred to as "Media".

The magnetic media forwarded to the Detroit Computing Center (DCC) will be considered a substitute for the Form 8362 paper document, provided the transaction is accepted by the DCC system. Receipt and acknowledgement of magnetic media is further discussed in a later section.

Approval to participate in the magnetic media reporting program is contingent upon the filer following these steps:

- · Review specifications
- · File application to participate
- · Satisfy acceptance testing procedures
- · Receive formal DCC approval
- File reports no more frequently than every two weeks
- · Monitor quality

Continued participation in the Magnetic Media Program is contingent upon maintenance of quality standards and timely reporting.

# Section 2. Application for Magnetic Media Reporting

For purposes of these specifications, the Casino is the agency preparing the CTRCs and the Transmitter is the organization preparing the magnetic media file. The Casino and transmitter may be the same or different organizations.

Generally, card clubs are subject to the same rules as Casinos, unless a different requirement for card clubs is explicitly stated in 31 CFR Part 103. Therefore, the term "Casino" when used in this document includes a reference both to a Casino and to a card club.

Casinos and their transmitters must complete and send to the Internal Revenue Service Detroit

Computing Center (DCC) an "Application for Magnetic Media Reporting of Currency Transactions" (Form DCC-4419) and a Declaration Statement. The Declaration Statement is an agreement between the IRS and the Casino or Transmitter relative to filing CTRCs magnetically.

Only a single application should be submitted, even if you file on more than one type of magnetic media (e.g., magnetic cartridge and 3-1/2 inch diskette).

DCC will review the application and notify the applicant, in writing, of authorization to file. Magnetic media reports may not be filed until the application has been approved.

After you have received approval to file on magnetic media, you need not reapply each year; however notify DCC in writing if:

- You change media type (diskette to cartridge, etc.) or report using more than one type of media.
- You discontinue filing on magnetic media.
- You have used a transmitter to prepare your magnetic media but now prepare the transmission from your own computer

If any of these conditions apply to you, contact DCC for clarification. Also, notify DCC in writing if you had hardware or software changes that would affect the characteristics of your magnetic media submission. Please use your Transmitter Control Code (TCC) and Location Control Code (LCC) in all contacts with DCC.

#### Section 3. Filing of Magnetic Media Reports

#### General:

DCC will advise magnetic filers when they may begin to file using magnetic media. Until this notification has been issued, magnetic media will not be accepted.

If the magnetic filing system encounters problems which appear will remain unresolved for a potentially lengthy period, the filer will be advised to stop magnetic filing until the problem has been resolved.

Do not file a paper Form 8362 for Casino transactions, which are reported by magnetic media.

If entire files are unreadable due to format errors, etc. we will contact the transmitter by via telephone to send a replacement for the file. Invalid transactions on a file, however, should be corrected and resubmitted as part of the file for the next full reporting period. A filer whose error rates are at a high level on a continuing basis may risk being discontinued as a magnetic media filer.

Filers are required to retain a copy of the Casino Form 8362 or have the ability to reconstruct the data filed magnetically for a period of five years. In addition, the magnetic filer must retain the acknowledgement from DCC to facilitate inquiries for the same period as well as any 'working' papers, which may be necessary for centralized keying of transactions.

Aggregation of Casino information is to be automated if possible, however, the requirement for aggregation is not different using Magnetic Media filing than it would be if filing paper CTRCs.

#### Transmittal Process:

A Form DCC-4804 Transmittal must accompany your magnetic media submissions. DCC encourages the use of computer-generated forms that include all necessary information. Be sure to include the forms or computer generated substitute with your media shipment. Do not mail the cartridges or diskettes and transmittal documents separately.

The filer should sign the affidavit on DCC-4804; however, an agent may sign the affidavit on behalf of the filer if all of the following conditions are met:

- The agent has been designated the authority to sign the affidavit under and agency agreement (either oral, written, or implied) that is valid under any state law.
- The agent signs the affidavit and adds the caption 'For: (Name of Filer)'. See form 4800 (CTR Magnetic Media Reporting Instruction) for detailed instructions.

Before submitting magnetic media files, include the following:

- A signed transmittal Form 4804 or computer generated substitute.
- The magnetic media with an external identifying label as described in Part B, Section 2 and 3. Be sure to include the proper sequence on the label.
- A statement on the outside of the shipping container that states "Attn: Tape Library, 'Deliver unopened: CTRC Magnetic Media; \_\_of \_\_'." If there is only one container, mark the outside as 1 of 1. For multiple containers, include the sequence (e.g. 1 of 3, 2 of 3, etc.).

DCC will not pay or accept 'Collect on Delivery' or 'Charged to IRS' shipments of CTRCs on magnetic media that an individual or organization is legally required to report.

#### Data Sequencing and Validation Criteria:

The following data controls must be adhered to or the CTRC magnetic media will be rejected. The data records must be in the following sequence:

- Transmitter (1A)
  First record on the file must be only one.
- Casino Location Header (2A)
   One Casino Location Header record for each Casino location reporting on the magnetic media.
- Transaction Summary (2B)
   One record of this type for each transaction being reported.
- Customer (Part 1, Section A) (2C)
   One record of this type for each customer involved in the transaction reported in Record 3A.
- Agent (Part 1, Section B) (2D)
  One record of this type for each agent involved in the transaction reported in Record 3A.
- Location Summary (8A)
  One record for each Casino reporting transactions on this file. Follows the last transaction reported for the Casino

location.

 Casino Summary (8B)
 One record of this type. Follows the last Location Summary (9A) record.

File Summary (8Z)
Last record on the file – must only be one.

#### Section 4. Filing Requirements

The casino documents filed using magnetic media will be filed on a biweekly basis (i.e., January 1, 2002 - January 14, 2002). Magnetic media must be prepared and sent for processing as soon as possible after the reporting period ends. A fixed reporting cycle will be established for each filer.

In order to allow the filer sufficient time to accumulate data, create the magnetic media file, and submit the file to the DCC, Treasury has determined that all transactions filed on magnetic media will be considered filed timely if received by the DCC no more than 30 days after the date of the transaction.

Once a filer begins filing Casino documents utilizing magnetic media, all original, replacement, amended, and late report filings must be submitted on magnetic media.

BSA regulations require that filers retain a copy of the CTRC data or have the ability to reconstruct the data filed magnetically for a period of five years. In addition, the magnetic filer must retain the acknowledgment from DCC to facilitate inquiries for the same period as well as any "working" papers that may be necessary for centralized processing of transactions.

Although a duly authorized agent may sign the affidavit, the filer is held accountable for the accuracy of the Form DCC-4804 and the data that is submitted.

# Section 5. Test Files and Acceptance Procedures

DCC will assist new transmitters with their initial magnetic media submission by reviewing a

test file. When ready to file, the Filer will be asked to provide a test file. The testing process will be as follows:

- With all test data submit a Form DCC-4804 or a computer-generated substitute, which includes your TCC and the number of CTRCs submitted. The Form DCC-4804 contains a check box to indicate the type of file; (e.g., production or test).
- The test data must be formatted according to the current requirements. The information in the "1A" and "2A" records, which defines the filing Casino, must be actual information not fictitious.
- The test data should consist of a set of sample Casino forms, containing data normally supplied by the filer. The test file must contain at least 50, but not more than 100 CTRCs.
- Upon receipt of the test file the DCC will review and provide feedback to the transmitter within ten working days.
- If 95% of the test documents are error free and the file is correctly formatted, a letter granting final acceptance will be issued by the DCC allowing the transmitter to participate in the Magnetic Media Program.
- When a test file is not acceptable, DCC will identify the errors and discuss the necessary corrections with the filer. When the errors are corrected, the filer should send a new set of test data to DCC. The filer is responsible for correcting their software to eliminate errors. If, after three attempts, the filer's test file continues to be unacceptable, the filer must develop an acceptable plan for correcting deficiencies before any further tests.
- Approval to participate in the program applies to the system compatibility only and not to the accuracy relative to the requirements of the Bank Secrecy Act and the implementing regulations. Thus, approval for magnetic filing only means that the format is acceptable and adheres to

the current specifications for magnetic filing.

 Accepted filers will be notified and issued an eight character Transmitter Control Code (TCC). In addition, a five character Location Code will be assigned, as some Casinos have multiple locations.

#### Section 6. Vendor List

DCC maintains a list of vendors who support magnetic media. There are currently no vendors supplying software for filing Casino documents magnetically.

If you are a vendor who offers a software package, has the ability to produce magnetic media for your customers, and you would like to be included on the list, submit a written request to DCC. The request should include:

- · Company name
- Address
- · Telephone number
- Contact person
- Type(s) of magnetic media offered (e.g., 18/36 track cartridge; or 3 1/2 inch magnetic diskettes).

# Section 7. Receipt and Acknowledgment of Magnetic Media Files

Each CTRC will be acknowledged to the transmitter as soon as possible after receipt. The transmitter should immediately match the acknowledgments to the original file transmitted.

If the filer does not receive the acknowledgement file, the CTRC's are not considered filed and must be resubmitted. This could be a result of unreadable data or a tape, which cannot be processed.

Any CTRC that contains errors will be flagged and error codes indicating the reason for the error(s) will be returned via an acknowledgment record. These error situations should be corrected and the records sent back to DCC as correction records and not as amendments. The

acknowledgment record will include only error codes and the minimum information needed to identify individual CTRCs. The logical record length of each acknowledgment record will be 57 characters, blocked 5700. It will contain up to the first eight error codes. See the Acknowledgment Record Format section.

DCC acknowledges receipt by inserting a document control number in the DCN field of the CTRC 3R Record. **The DCN number must be included** when resubmitting corrections for those records flagged because of errors.

If you receive acknowledgment of transactions, which you did not file, or you do not receive acknowledgment for transactions that you did file, please notify the CTRC Magnetic Media Coordinator as soon as possible by calling the Help Desk. The Help Desk phone number is 1-866-743-5748.

# Section 8. How to File Amended CTRC's or Corrections to Invalid Files

If a CTRC that was prepared and submitted on magnetic media must be amended, you must file a complete replacement report as soon as possible. All fields must be completed with the correct information, NOT JUST THE DATA FIELDS NEEDING CORRECTION. If the original CTRC was submitted on magnetic media, then any amendments must also be filed on magnetic media. Amended reports for magnetically filed documents will not be accepted on paper. Amendments to magnetically filed documents must include the document control number specified on the acknowledgment record, along with the amended indicator.

DCC checks each document filed for errors as indicated in Exhibit 5. If errors are found, the record is marked and the error codes are returned to the filer on the acknowledgment record. However, the CTRC is accepted as filed and becomes part of the DCC database even though it contains errors. CTRCs with errors are to be corrected and re-submitted as part of the next reporting period file. Any filer whose error rates are at a high level on a continuing basis may risk being suspended as a magnetic filer. Corrections

to documents with errors must be forwarded on magnetic media, and the Document Control Number (DCN) that DCC has assigned to the original record must be included. (The DCN will be returned on the acknowledgment file in the "3R" record and must be placed in the "2B" record when corrections/amendments are made to previously filed CTRCs.

If files are unreadable due to format errors, problems, etc., or unprocessable due to file errors, the transmitter will be contacted by telephone to send a replacement for the file. Invalid files are to be corrected and re-submitted as soon as possible to prevent them from being considered as filed late.

# Section 9. How to Contact the Detroit Computing Center

Magnetic media processing for CTRCs is centralized at the DCC. Magnetic cartridges and diskettes are to be mailed to the following address:

Magnetic Media Coordinator Detroit Computing Center P.O. Box 740-A Detroit, MI 48232

Direct all magnetic filing correspondence and all requests for magnetic media related publications or information to the following:

Magnetic Media Coordinator Detroit Computing Center 985 Michigan Avenue Detroit, MI 48226-2458

Direct all Bank Secrecy Act (BSA) compliance related correspondence and questions to the BSA Technical Support Branch at the following address and phone number:

BSA Technical Support Branch Compliance Review Group Detroit Computing Center 985 Michigan Avenue Detroit, MI 48226-2458

Phone Number: (800) 800-2877

(313) 234-1613

#### Section 1. File Specifications

The specifications contained in the following sections define the required file format and contents of the records to be included in the magnetic media file. These specifications must be adhered to unless deviations have been specifically granted by DCC in writing.

All records must be a fixed length of 390 characters.

#### Section 2. Cartridge Specifications

Usually DCC will be able to process any compatible cartridge file. The standard file characteristics are 18/36 track, EBCDIC, odd parity, 6250 BPI, and standard labels. The standard data set name to be used on files is ICCTP.CI047.C8362. All deviations from the above must be approved in writing by DCC.

All compatible cartridge files must be 1/2 inch contained in plastic cartridges, which are approximately 4 inches, by 5 inches by 1 inch in dimension.

An external label must appear on each cartridge submitted for processing. The following information must appear on the label:

- · The transmitters name
- Transmitter Control Code (TCC)
- · Date of preparation
- A reel number assigned by the preparer which must match the reel number on the internal label
- · Number of reels in file
- · Reel sequence number (i.e., 01 of 08)

The above information will assist DCC in processing a cartridge. Cartridges will normally be returned within 45 days of receipt, however they may not be returned in the same shipping containers in which they were received.

The cartridge records defined in these specifications should have a **block size of 27,690**.

For the purposes of these specifications the following conventions must be used for internal

#### labels:

#### Header Label:

- Standard headers provided they begin with 1HDR, HDR1, VOL1, VOL2, UHL1, or "b LABEL".
- · Consist of a maximum of 80 positions.

#### **Trailer Label:**

- Standard trailer labels may be used provided that they begin with 1EOR, 1EOF, EOR1, EOF1, EOV1, or EOV2.
- · Consist of a maximum of 80 positions.

# Section 3. 3-1/2 inch Diskette Specifications

These specifications define the file characteristics acceptable for diskette media reporting. These characteristics must be adhered to unless deviations are specifically authorized by DCC in writing.

All records must be fixed in length to the size specified for each record type, 390 characters.

Usually DCC will be able to process any compatible diskette file. The standard file characteristics are 3-1/2 inch diskette double sided/double density or double sided/high density. The standard data set name to be used on files is CTRC8362. All deviations from the above must be approved in writing by DCC.

All diskettes must be generated using MS-DOS or Windows on an IBM compatible personal computer in ASCII mode. All alphabetic characters must be in the upper case only. Records cannot span diskettes.

An external label must appear on each diskette submitted for processing. The following information should appear on the label:

- · The transmitters name
- Transmitter Control Code (TCC)
- Date of preparation
- Period Coverage Dates
- · Number of diskettes in file
- · Diskette sequence number (i.e., 01 of 08)

The above information will assist DCC in

processing a diskette. Diskettes will normally be returned within 45 days of receipt, however they may not be returned in the same shipping containers in which they were received.

The diskette records defined in these specifications should be **unblocked 370 character records.** The industry standard record delimiter for diskette data records is the two-byte combination of 0D0A hexadecimal characters (carriage return, line feed).

#### Section 4. File Organization

All incoming data must be in the expected format. An asterisk (\*) denotes a mandatory record for the file and for each transaction.

Based on the filer's application, DCC keeps identifying information on file for the reporting Casino. This data includes the transmitter code, transmitter and casino names, addresses, EINs, and location codes (TCC and locations codes are assigned by DCC). The Transmitter and Header records use this information to correctly identify the transmitter and the filer. Any records that do not match DCC files cannot be processed.

#### \* Transmitter (1A) Record

This must be the first record on the file. There can be only one of these records.

- \* Casino Location Header (2A) Record There must be one of these records for each Casino location included on the file. This record must immediately precede all records relating to that Casino location.
- \* Transaction Summary (2B) Record
  There must be one Transaction Summary
  Record for each transaction reported. This
  record will be the first for each transaction.

# \* Customer (Part 1 -Section A) (2C) Record

There must be one customer record for each transaction. There may be multiples of this record type depending on the number of persons or organizations who are customers of this transaction.

\* Agent (Part 1 - Section B) (2D) Record

This record must be filed if a person(s) acted as an agent for the customers of this transaction. This record is not required if the customer conducted the transaction on his own behalf. There may be multiples of this record.

#### \* Location Summary (8A) Record

There must be one of this record type for each Casino Location reporting on the file. It is the control record for the reporting casino location. It must be the last record associated with the casino location.

#### \* Casino Summary (8B) Record

There must be one of this record type for each Casino reporting. It must be the last record associated with the Casino and will follow the last Location Summary Record for the Casino.

#### \* File Summary (8Z)

There must be one of these records on the file and it must be the last record on the file.

Records that fail to meet these requirements will be coded as correspondence errors and returned to the filer for corrections.

#### Section 5. Overview of File

All original, replacement, amendment, and late report filings can be submitted on magnetic media. The DCN assigned to the error record must be included. The DCN must also be included for amendments, along with the amendment indicator code.

All dates are to be in the format of century, year, month, day, with month and day both being right justified and zero-filled. (CCYYMMDD)

Money amounts are 10 positions and should be right justified and zero filled. Enter dollar amounts only. All cents should be rounded up to the next higher dollar amount (i.e., \$10,000.06 should be reported as \$10,001).

The transaction sequence number, which is generated by the transmitter, will be used in the acknowledgment records sent back to the

transmitter. This will be a five digit field starting with one and incremented by one for each succeeding currency transaction report by casino. It is to be right justified and zero filled.

All zip codes are to be left justified and zero filled.

All name, address, and city fields are to be left justified and space filled.

All name and address fields relating to CTRC data must follow the Name Editing Conventions specified in the attachments.

Account numbers must NOT contain leading zeros unless they are part of the actual account number. All entries must be left justified and space filled.

Do not include lower case characters.

All "Filler" fields should be space filled. Do not use low values as a substitute for spaces. Blank fields must be space filled.

All validation and consistency edits are specified in Exhibit 5.

### Section 6. Record Layout - Transmitter "1A" Record

This record identifies the transmitter of the file (person or organization handling the data accumulation and formatting). There can be only one "1A" Record on each magnetic media file and it must be the first record after the header label. All data elements for this record are required. All records on the must be 390 characters. For cartridge files, the **block size must be 27,690 characters**. All alpha characters entered in the file must be uppercase.

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "1A".
3-37	Casino's Trade Name	35	REQUIRED. Enter the name by which the casino does business and is commonly known. Use the standard abbreviations and name editing instructions in Exhibits 2 and 3. Left justify and blank fill unused positions.
38-72	Casino's (Transmitter) Legal Name	35	REQUIRED. Enter the legal name of the organization that is transmitting this file, but only if different from the casino's trade name. The name must match the EIN. Use the standard abbreviations and name editing instructions in Exhibits 2 and 3. Left justify and blank fill unused positions.
73-107	Transmitter Street Address	35	REQUIRED. Enter the street address of the transmitter. Do not abbreviate or use a post office box number. Left justify and blank fill unused positions.
108-132	Transmitter City	25	REQUIRED. Enter the city of the transmitter. Do not abbreviate city name. Left justify and blank fill unused positions.
133-134	Transmitter State	2	REQUIRED. Enter the state of the transmitter. Use the correct abbreviation from Exhibit 4.
135-143	Transmitter Zip Code	9	REQUIRED. Enter the valid 9-digit Zip Code of the transmitter. If only the first 5 digits are known, left justify and fill the unused positions with zeroes. Exhibit 6 holds valid state zip code combinations.
144-146	Transmitter Area Code	3	REQUIRED. Enter the telephone area code of the transmitter.
147-153	Transmitter Telephone	7	REQUIRED. Enter the telephone number of the transmitter.
154-188	Transmitter Contact Name	35	REQUIRED. Enter the name of the person who is the official contact for this file.

Media Position	Field Title	Length	Description and Remarks
189-197	Transmitter's Federal EIN	9	REQUIRED. Must be the valid 9-digit number assigned to the transmitter by IRS and must match the transmitter name. Do not enter hyphens, slashes, alpha characters, all 9s or all zeroes.
198-205	Coverage Beginning Date	8	REQUIRED. Enter the earliest original transaction date on the file. Enter as a numeric 8-position field in format: century, year, month, day (CCYYMMDD).
206-213	Coverage Ending Date	8	REQUIRED. Enter the latest original transaction date on the file. Enter as a numeric 8 position field in format: century, year, month, day (CCYYMMDD)
214-221	Transmitter Control Code (TCC)	8	REQUIRED. Enter the 8-character Transmitter Control Code (TCC) assigned by DCC.
222-380	Blank	159	Enter blanks.
381-390	User Field	10	Use this field for any descriptive information you may require, otherwise, enter blanks. We discourage the use of TIN information in this field. Not included in acknowledgment file.

## Section 7. Record Layout - Casino Location Header "2A" Record

This record is required for each Casino Location reporting transactions on this file; it identifies information regarding the Casino location where reported transactions were completed. The number of Casino Location Header records will depend on the number of different casino locations reporting on the magnetic media file.

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "2A".
3-10	Transmittal Control Code	8	REQUIRED. Enter the TCC assigned by DCC.
11-19	Employer Identification Number	9	REQUIRED. It must be the valid Employer Identification Number (EIN) assigned by the IRS to the reporting Casino. Do not enter special characters, all nines or all zeroes.
20-24	Location Code	5	REQUIRED. Enter the Location code for the submitting casino location as assigned by DCC. Do not use all zeroes.
25-44	Approving Official's Title	20	REQUIRED. Enter the official title of the approving official. Left justify, fill unused positions with blanks.
45-79	Preparer's Name	35	REQUIRED. Enter the name of the preparer. See Exhibit 3 for name editing conventions. Left justify and fill unused positions with blanks.
80-114	Contact Person's Name	35	REQUIRED. Enter the name of the contact person. See Exhibit 3 for name editing conventions. Left justify and fill unused positions with blanks.
115-117	Contact Person's Area Code	3	REQUIRED. Enter the contact person's area code.
118-124	Contact Person's Telephone Number	7	REQUIRED. Enter the contact person's telephone number.
125-132	Approval Date	8	REQUIRED. Enter the date transaction file was approved
133	Resolution Code	1	REQUIRED. Enter the code to indicate where correspondence relating to these transactions should be sent.  Code Type of Resolution Casino Headquarters Casino Location 4 Transmitter

# Part B – Record Specifications

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Media Position	Field Title	Length	Description and Remarks
134-380	Blank	247	Enter blanks.
381-390	User Field	10	Use this field for any descriptive information you may require, otherwise, enter blanks. We discourage the use of TIN information in this field. Not included in acknowledgment file.

## Section 8. Record Layout - Transaction Summary "2B" Record

Identifies and describes the actual casino currency transaction, provides a summary of the transaction component parts and the transaction amount. Data fields within the Transaction Summary Record identify the counts for the Customer "2C" Records and the Agent "2D" Record. There can be any number of these record types per file, one record for each transaction.

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "2B".
3-10	Transmitter Control Code	8	REQUIRED. Enter the 8-character TCC assigned by DCC. The TCC is also required on Form DCC-4802.
11-19	Employer Identification Number (EIN)	9	REQUIRED. Enter the EIN as assigned by the IRS.
20-24	Location Code	5	REQUIRED. Enter the location code for the casino reporting transactions as assigned by DCC. Do not enter all zeroes.
25-29	Transaction Sequence Number	5	REQUIRED. Enter a sequential number starting with 00001 and increment by 1 for each Casino Transaction Summary "2B" Record on the file.
30-117	Transaction Cash-in Codes (1 position) and Amounts (10 positions)	88	REQUIRED. Enter the appropriate code or codes to describe the transaction. At least one entry is required in the Transaction Cash-in Code or Transaction Cash-out Code. Enter all codes that apply. In position 30, enter the first Transaction Cash-in Code followed by the 10-digit cash amount in positions 31-40. Right justify cash amounts and fill unused positions with zeros. Enter subsequent Cash-in Codes and Amounts in positions 41-117. A total of eight code and amount pairs may be entered when appropriate. Enter blanks in unused positions.  Code Type of Transaction  A Purchase of casino chips, tokens, and other gaming instruments  B Deposit (front money or safekeeping)  C Payment on credit (including markers)  D Bets of currency  E Currency received for wire transfers out  F Purchase of casino checks  G Currency exchange  H Other Cash-in
118-137	Other Cash-in Description	20	If "H" is used for any Cash-in Codes in Positions 30-117, enter a description of the cash-in transaction. Left justify and fill unused positions with blanks.

Media Position	Field Title	Length	Description and Remarks
138-247	Transaction Cash-out Codes (1 position) and Amounts (10 positions)	110	REQUIRED. Enter the appropriate code or codes to describe the transaction. At least one entry is required in the Currency Exchange Indicator, Transaction Cash-in Code or Transaction Cash-out Code. Enter all codes that apply. In position 138, enter the first Transaction Cash-out Code followed by the 10-digit cash amount in positions 139-148. Right justify cash amounts and fill unused positions with zeros. Enter subsequent Cash-out Codes and Amounts in positions 149-247. A total of ten code and amount pairs may be entered when appropriate. Enter blanks in unused positions.  Code Type of Transaction  I Redemption of casino chips, tokens, and other gaming instruments  J Withdrawal of deposit (front money or safekeeping)  K Advance on credit (including markers)  L Payment on bet (including slot jackpot)  M Currency paid from wire transfer in  N Negotiable instrument cashed (including checks)  O Currency Exchange  P Travel/complimentary expenses & gaming incentives  T Payments for tournament, contest or other promotions  Q Other cash-out
248-267	Other Cash-out Description	20	If "Q" is used for any Cash-out Code in positions 138-247, enter a description of the cash-out transaction. Left justify and fill unused positions with blanks.
268-277	Transaction Total Amount In	10	REQUIRED. Enter the total amount of currency received in this transaction. Enter only dollar amounts, no cents, always round cents up to next higher dollar. Do not truncate. Right justify and fill unused positions with zeroes.
278-287	Transaction Total Amount Out	10	REQUIRED. Enter the total amount of currency paid out in this transaction. Enter only dollar amounts, no cents, always round cents up to next higher dollar. Do not truncate. Right justify and fill unused positions with zeroes.
288-295	Transaction Date	8	REQUIRED. Enter the date of this transaction. Enter as a numeric 8-digit field in the format century, year, month, day (CCYYMMDD).
296-297	Foreign Currency	2	If foreign currency was used, enter the two-digit country code for the currency used. See Exhibit 4.

Media Position	Field Title	Length	Description and Remarks
298-299	Number of Customer Records	2	REQUIRED. Enter the count of Customer "2C" Records associated with this transaction (01-98). Right justify and fill unused positions with zeroes.
300-301	Number of Agent Records	2	REQUIRED. Enter the count of Agent "2D" Records associated with this transaction (00-98).
302	Multiple Transactions	1	Enter an "M" if there are multiple transactions.
303-316	Document Control Number (DCN)	14	REQUIRED. Enter all zeroes on initial submission of this transaction. Enter the DCN assigned to the transaction by DCC when submitting a corrected or amended record.
317-380	Filler	64	Blank.
381-390	User Field	10	Use this field for any describe information you may require, otherwise, enter blanks. We discourage the use of TIN information in this field. Not included in acknowledgment file.

Section 9. Record Layout - Customer (Part 1 - Section A) "2C" Record

This record identifies the person(s) or organization(s) for whom this transaction was completed. This record is required. There should be one of these records for every customer involved in this transaction.

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "2C".
3-7	Location Code	5	REQUIRED. Enter the location code for the submitting casino. Do not use all zeroes.
8-12	Transaction Sequence Number	5	REQUIRED. Enter the transaction sequence number from the associated Transaction Summary "2B" Record.
13	Organization or Individual Code	1	REQUIRED. Enter the code to designate whether the beneficiary name in positions 14-48 is an Organization Name or an Individual's Name.  Code Org/Ind Type 1 Individual 2 Organization 3 Both
14	Multiple Persons	1	Enter a "P", if there are multiple persons.
15	Amends Prior Report	1	Enter the code to designate if this amends a prior report.  Code Reports 1 Amends
16-65	Organization or Individual Name	50	REQUIRED. Enter the customer's name. Use conventions from Exhibits 2 and 3 to edit the name.
66-100	Street Address	35	REQUIRED. Enter the customer's street address. Do not enter Post Office Box Number. Do not abbreviate.
101-125	City	25	REQUIRED. Enter the customer's city. Do not abbreviate. Left justify and fill unused positions with blanks.
126-127	State	2	REQUIRED. Enter the customer's state code. Use the valid abbreviation from Exhibit 4.
128-136	Zip Code	9	REQUIRED. Enter the customer's valid 9-digit ZIP code. If only the first 5 digits are known, left justify and fill the unused positions with zeroes.
137-138	Country Code	2	Enter a valid 2-digit country code, if other than U.S. Use the valid abbreviation from Exhibit 4.

Media Position	Field Title	Length	Description and Remarks
139-147	SSN/EIN	9	Enter the Customer's Social Security Number (SSN) or Employer Identification Number (EIN). EIN is used if the customer is <u>not</u> an individual is a nonresident alien, who does not have an SSN or an IRS Individual Tax Identification Number (ITIN), enter "NONE".
148-155	Date of Birth	8	Enter the Date of Birth, if it is known, as an 8-position field in format: century, year, month, day (CCYYMMDD).
156	Method of Identification	1	REQUIRED. Enter the code for the type of identification used to verify the customer's identity. If more than one type of id is used, always submit first type.  Code Identification Code Identification  1 Examined ID credential 3 Organization  2 Known Customer - info on file
157	Describe ID Credential	1	REQUIRED. Enter the code for the type of identification used to describe the customer's or beneficiary's name. If more than one type of id is used, always submit first type.  Code Type Code Type  2 Driver Permit/State I.D. 3 Alien ID 1 Passport 4 Other
158-177	Other description	20	If code in id credential above is 4, "other", enter description.
178-179	ID Issued by State/Country	2	REQUIRED. Enter valid country code or state code from Exhibit 4 from where the identification was issued.
180-201	ID Number	22	REQUIRED. Enter the number from the identification.
202-223	Customer's Account Number	22	REQUIRED. Enter the principal account number the casino has assigned to the owner of this transaction. If no account number has been assigned, enter "NONE".
224- 380	Blank	157	Enter blanks.
381-390	User Field	10	Use this field for any descriptive information you may require; otherwise, enter blanks. We discourage the use of TIN information in this field. The acknowledgment file WILL include this field.

## Section 10. Record Layout - Agent (Part 1- Section B) "2D" Record

This record contains information about the identity of the person(s) who acted as Agent for the transaction. This record is required when there is a separate agent involved in the transaction.

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "2D".
3-7	Location Code	5	REQUIRED. Enter the location number for the submitting casino. Do not use all zeroes.
8	Multiple Agents Indicator	1	Enter an "A", if there are multiple agents.
9-13	Transaction Sequence Number	5	REQUIRED. Enter the transaction sequence number from the associated currency transaction "2B" Record.
14-48	Agent Name	35	REQUIRED. Enter the agent's name. Use the name editing instructions in Exhibit 3. Left justify and fill unused positions with blanks.
49-83	Agent Street Address	35	REQUIRED. Enter the agent's mailing address. Do not use Post Office Box. Left justify and fill unused positions with blanks.
84-108	Agent City	25	REQUIRED. Enter agent's city. Do not abbreviate. Left justify and fill unused positions with blanks.
109-110	Agent State	2	REQUIRED. Enter the agent's state. Use the valid abbreviation from Exhibit 4.
111-119	Agent Zip Code	9	REQUIRED. Enter the valid 9-digit Zip Code. If only the first 5 digits are known, left justify and fill the unused positions with zeroes.
120-121	Country Code	2	Enter a valid 2-digit country code, if not U.S. Use Exhibit 4.
122-130	SSN	9	REQUIRED. Enter the agent's SSN. If that individual is a non-resident alien who does not have an SSN or ITIN, enter "NONE".
131-138	Date of Birth	8	Enter the Date of Birth, if it is known, as an 8-position field in format: century, year, month, day (CCYYMMDD).
139	Method of Identification	1	REQUIRED. Enter the code for the type of identification used to verify the customer's or beneficiary's name. If more than one type of id is used, always submit first type.  Code Identification  1 Examined ID credential  2 Known Customer - info on file

Media Position	Field Title	Length	Description and Remarks
140	Describe ID Credential	1	REQUIRED. Enter the code for the type of identification used to describe the customer's or beneficiary's name. If more than one type of id is used, always submit first type.  Code Type Code Type  2 Driver Permit/State I.D. 3 Alien ID 1 Passport 4 Other
141-160	Other description	20	If code in "id credential" above is 4 "other", enter description.
161-162	ID Issued By State/Country	2	REQUIRED. Enter the valid state or country code where identification was issued. Use state and country codes from Exhibit 4.
163-184	ID Number	22	REQUIRED. Enter the number from the identification.
185-380	Blank	196	Enter blanks
381-390	User Field	10	Use this field for any descriptive information you may require; otherwise, enter blanks. We discourage the use of TIN information in this field. Not included in acknowledgment file.

## Section 11. Record Layout - Location Summary "8A" Record

This record is required for each casino location reporting transactions on this file. It follows the last transaction reported for the casino location. This record contains counts for the types of record associated with the casino location.

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "8A".
3-7	Location Code	5	REQUIRED. Enter the location number for the submitting casino. Do not use all zeroes. Right justify and fill unused positions with zeroes.
8-14	Location Transaction Summary Record Count	7	REQUIRED. Enter number of Transaction Summary "2B" records for the casino location
15-21	Blank	7	Enter blanks.
22-28	Customer Record Count	7	REQUIRED. Enter the number of Customer "2E" records for the casino location.
29-35	Agent Record Count	7	REQUIRED. Enter the number of Agent "2F" records for the casino location
36-47	Total Amount Reported for Location	12	REQUIRED. Enter the total dollar amount of currency reported for the casino location.
48-380	Blank	333	Enter blanks.
381-390	User Field	10	Use this field for any descriptive information you may require; otherwise, enter blanks. We discourage the use of TIN information in this field. Not included in acknowledgment file.

## Section 12. Record Layout - Casino Summary "8B" Record

This record is required; it summarizes counts of transactions for each Casino reporting on this file. It follows the last reported Location Summary "8A" Record filed for the Casino. This record contains counts of the number of each type of record for the Casino.

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "8B".
3-9	Location Record Count	7	REQUIRED. Enter number of Location "2A" records for the Casino.
10-16	Transaction Summary Record Count	7	REQUIRED. Enter number of Transaction Summary "2B" records for the Casino.
17-23	Blank	7	Enter blanks.
24-30	Customer Record Count	7	REQUIRED. Enter number of Customer "2E" records for the Casino.
31-37	Agent Record Count	7	REQUIRED. Enter number of Agent "2F" records for the Casino.
38-49	Total Currency Amount Reported for Casino	12	REQUIRED. Enter the total dollar amount of currency reported for the Casino.
50-380	Blank	331	Enter blanks.
381-390	User Field	10	Use this field for any descriptive information you may require; otherwise, enter blanks. We discourage the use of TIN information in this field. Not included in acknowledgment file.

## Section 13. Field descriptions/Record Layouts - File Summary Record "8Z" Record

This record is required as the last record on the file. There must be only one of this record type on the file. This record contains counts of the number of each type of record on the file.

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "8Z".
3-9	Casino Summary Record Count	7	REQUIRED. Enter number of Casino Summary "8B" records.
10-16	Location Summary Record Count	7	REQUIRED. Enter number of Location Summary "8A" records.
17-23	Transaction Summary Record Count	7	REQUIRED. Enter number of Transaction Summary "2B" Records.
24-30	Blank	7	Enter blanks.
31-37	Customer Record Count	7	REQUIRED. Enter number of Customer "2E" records.
38-44	Agent Record Count	7	REQUIRED. Enter number of Agent "2F" records.
45-56	Total File Amount Reported	12	REQUIRED. Enter total dollar amount of currency reported.
57-380	Blank	324	Enter blanks.
381-390	User Field	10	Use this field for any descriptive information you may require; otherwise, enter blanks. We discourage the use of TIN information in this field. Not included in acknowledgment file.

## Section 14. Record Layout - Acknowledgment "1A" Record

This record is created by DCC as part of an acknowledgment file returned to the Transmitter. This record contains identifying information and error codes pertaining to the transmitter data received by DCC. All records on the file will be 57 positions. For cartridge files, the block size will be 14,991 positions.

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "1A".
3-10	Coverage Beginning Date	8	From positions 163-170 of the incoming "1A" record.
11-18	Coverage Ending Date	8	From positions 171-178 of the incoming "1A" record.
19-26	Transmitter Control No. Code (TCC)	8	From positions 179-186 of the incoming "1A" record.
27-56	Error Codes (1-10)	30	Error Codes are assigned by DCC after consistency and validity edits. Exhibit 7 lists the codes. Each code is 3 digits.
57	Blanks	1	Blank filled.

## Section 15. Record Layout - Acknowledgment Location "2A" Record

This record is created by DCC as part of an acknowledgment file returned to the Transmitter. This record contains identifying information and error codes pertaining to the Location data received.

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "2A".
3-7	Location Code	5	From positions 20-24 of incoming "2A" record.
8-34	Error Codes (1-9)	27	Error Codes are assigned by DCC after consistency and validity edits. Exhibit 7 lists the codes. Each code is 3 digits.
35-57	Blank	23	Blank filled.

# Section 16. Record Layout - Acknowledgment Transaction Information and Error Code "3R" Record.

This record is created by DCC as part of an acknowledgment file returned to the Transmitter. This record contains identifying information and error codes pertaining to transactions records. The transaction sequence number identifies transactions. The DCC assigned Document Control Number is returned to the transmitter for each transaction.

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "3R".
3-7	Transaction Sequence Number	5	From positions 25-29 of incoming "2B" record.
8-17	Document Control Number	10	Assigned by DCC. A unique identifying number.
18-27	User Field	10	From positions 231-240 of the incoming "2E" record.
28-57	Error Codes (1-10)	30	Error Codes are assigned by DCC after consistency and validity edits. Exhibit 7 lists the codes. Each code is 3 digits.

## Section 17. Record Layout - Acknowledgment Trailer for Transmitter "9Z" Record

This record is created by DCC as part of an acknowledgment file returned to the Transmitter. This record is a systems control record and it summarizes the data processed by DCC. There are no error codes in this record.

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "9Z".
3-9	Number of Locations in File	7	Generated by DCC, the number of Location records processed from this file.
10-16	Number of Transactions (CTRCs) in File	7	Generated by DCC.
17-57	User Field	41	Blanks.

# Exhibit 1 – Definition of Terms

<u>Element</u>	<u>Description</u>	<u>Element</u>	<u>Description</u>
Account Number	The customer's account number as related to the transaction being reported, if any.	Checks	For purposes of this filing it includes all negotiable instruments, (including personal, business, bank,
Agent	Relates to the entries in Part I, Section B of the CTRC. Any individual who conducts a currency transaction on behalf of another individual or organization.		cashier's and third-party checks), money orders, traveler's checks, certificates of deposit and promissory notes not customarily accepted as money.
Amended Report	A report that is used to correct one that was previously filed and accepted by DCC.	Corrected Report	A report which is used to correct one that was previously filed but rejected by DCC because of validity or consistency errors.
Card Club	Any organization duly licensed or authorized to do business as a card club, gaming club, card room, gaming room, or similar	CTRC	Currency Transaction Report by Casinos (Form 8362)
	gaming establishment in the United States, including tribal card clubs, and having gross annual gaming revenue in excess of \$1,000,000. The term includes the principal headquarters and every	Customer	Any person involved in a currency transaction whether or not that person participates in the casino's gaming activities.
	domestic branch or place of business of the establishment.	EIN	Employer Identification Number
Casino	Any organization duly licensed or authorized to do business as a casino or gambling casino,	File	A file consists of all magnetic media records submitted by a transmitter.
	including a tribal casino, in the United States (except casinos	Filer	Casino that prepares the CTRC.
	located in Nevada under Regulation 6A) and having gross annual gaming revenues in excess of \$1 million. This includes the principal headquarters and every domestic branch or place of business of the casino.	Gaming Day	A casino's normal business day by which it keeps its books and records for business, accounting and tax purposes. If the casino offers 24-hour gaming, its gaming day is the 24-period by which it keeps its books and records.
		Identifying Numbers	For individuals, it is the Social Security Number (SSN). For customers that are not individuals, it is the Employer Identification Number (EIN). If an individual is a non-resident alien, it is an Individual Tax Identification Number (ITIN).

# Exhibit 1 – Definition of Terms

<u>Element</u>	<u>Description</u>
Location Code	DCC will assign a location code to each casino location. The code is used to differentiate between various casinos that file under the same EIN. It is an alpha/numeric code, which must be used when submitting transactions using magnetic media.
Magnetic Media	Magnetic media refers to 18/36-track magnetic cartridge, or 3-1/2 inch diskette.
Resolution Code	Code which signifies who is to receive the correspondence relating to transactions.
SSN	Social Security Number
TIN	Taxpayer Identification Number
Transmitter	Person or organization submitting magnetic media file(s).
Transmitter Control Code (TCC)	An eight-character number assigned by DCC to the transmitter prior to actual reporting on magnetic media. This code is inserted in most records of your files and must be present before the file can be processed. An Application for Magnetic Media Reporting must be filed with DCC to receive this number.

# Exhibit 2 – Standard Word Abbreviations

<u>Word</u>	<u>Abbreviation</u>	<u>Word</u>	<u>Abbreviation</u>
Accounting	ACCTG	Headquarters	HDQTRS
Accounts	ACCTS	Highway	HWY
Administration	ADMIN	Hospital	HOSP
Air Force Base	AFB	Incorporated	INC
Apartment	APT	Industry(ies)	INDUST
American	AMER	Information	INFO
Associates	ASSOC	Institute, Institution	INST
Association	ASSN	Insurance	INS
Avenue	AVE	International	INT
Bank	BK	Lane	LN
Banking	BKG	Limited	LTD
Branch	BR		MGMT
Broadway	BWY	Management Manufacturers	MFTRS
	BLDG	Manufacturing	MFG
Building	CASLTY	Market	MKT
Casualty			
Center	CTR	Municipal	MUN
Certificate	CERT	Mutual	UTL
Certificate of Deposit	CD	National	NAT
Circle	CRL	Northeast	NE NO
Commerce	CMRC	Northern, North	NO
Commission	COMM	Northwest	NW
Company	CO	Organization	ORG
Comptroller	COMPT	Park	PK
Consolidated	CONS	Place	PL
Construction	CONST	Plaza	PLZ
Corporation	CORP	Post Office	PO
Cooperative	COOP	Railroad	RR
County	CNTY	Realty	RLTY
Court	CT	Road	RD
Credit Union	CU	Room	RM
Department	DEPT	Route	RT
Deposit	DEP	Savings	SAV
Distributor, Distributing	DISTB	Savings and Loan	SL
District	DIST	Security	SEC
Division	DIV	Service	SERV
Drive	DR	Southeast	SE
East, Eastern	E	Southern, South	SO
Electrical	ELEC	Southwest	SW
Exchange	XCHG	Street	ST
Federal	FED	Suite	STE
Federal Credit Union	FCU	Transportation	TRANS
Finance	FIN	Trust	TR
Financial	FINCL	University	UNIV
First National Bank	FNB	US Air Force	USAF
Foreign	FORGN	US Army	USA
General	GEN	US Coast Guard	USCG
Government	GOVT	US Marine Corps	USMC
Group	GRP	US Navy	USN

#### Exhibit 2 - Standard Word Abbreviations

<u>Word</u>	<u>Abbreviation</u>
Village	VLGE
Western, West	W

Note: All abbreviations listed may

be changed from singular to plural, and vice versa, by the addition or deletion

of the letter 's'.

#### Exhibit 3 - Name Editing Conventions

Delete any titles, prefixes, suffixes or other descriptive information such as Mr., Mrs., Dr., Reverend, Partner, or Trustee. Do not delete suffixes that distinguish family members such as Jr., Sr., III or IV. Suffixes should be edited to follow the middle initial.

Delete all punctuation (e.g., Jr. would be submitted as Jr).

Spanish surnames. Care must be taken in formatting Spanish surnames as the names are usually written in the order of first name, father's last name, and then mother's last name, i.e., Juan Vega Santiago. The father's last name, Vega would be used as the last name; however, both last names should be retained. Example: Vega/Santiago/Juan.

Place a slash ("/") before each name (including suffixes) except the first surname (e.g., White/Elizabeth/A) but not between compound names such as "Van Gogh".

If only the surname of an individual is present, then place a slash after it (e.g., <u>Jones/</u>).

If a non-individual is listed, do not enter slashes between names. Delete the word, "The" whenever it appears.

If an organization has a separate "doing business as" (DBA) name, enter the organization's legal and business names (e.g., "Smith Enterprises, Inc., DBA Smith Casino Tours").

# Exhibit 4 – Country and State Code Standard Abbreviations

COUNTRY	CODE	COUNTRY	CODE
Afar & Issas (French)	FT * (DJ)	British Columbia	ВС
Afghanistan	AF ´	Manitoba	MB
Albania	AL	New Brunswick	NB
Algeria	AG	New Foundland	NF
Andorra	AN	(Incl. Labrador)	
Angola	AO	Nova Scotia	NS
Anguilla	AV	Ontario	ON
Antarctica	AY	Prince Edward Is.	PE
Antigua (Barbuda &Redonda)	AC	Quebec	PQ
Antilles, Netherlands	AE	Saskatchewan	SN
Argentina	AR	Yukon Terr.	YT
Armenia	AM	North West Terr.	NT
Aruba	AW	Cape Verde Island	CV
Ashmore & Cartier Is.	AT * (AS)	Cayman Island	CJ
Australia	AS	Czech Republic	CP
Austria	AU	Central African Republic	CT
Azerbaijan	AJ	Chad	CD
Bahamas	BF	Channel Islands	OC * (UK)
Bahrain	BA	Chile	CI
Baker Island	FQ * (US)	China (Mainland)	CH
Bangladesh	BG	China (Taiwan)	TW
Barbados	BB	Christmas Islands	KT * (AS)
Bassas Da India	BS * ()	Clipperton Island	IP * ()
Belgium	BE	Cocos Islands	CK * (AS)
Belize	BH	Columbia	CO
Benin (Dahomey)	DM	Comoros	CN
Bermuda	BD	Congo (Brazzaville)	CF
Bhutan	BT	Congo (Zaire – Kinshasa)	CG
Bosnia & Hercegovina	BK	Cook Is.	CW * (NZ)
Bolivia	BL	Coral Sea Is. (Terr.)	CR *()
Botswana	BC	Costa Rica	CS
Bouvet Is.	BV * (NO)	Croatia	HR
Brazil	BR	Cuba	CU
British Indian Ocean Terr.	IB	Cyprus	CY
British Virgin Islands	VI	Cyprus, North (Turkish)	CX
British West Indies	BW *	Czechoslovakia	CZ *
Brunei Darusallam	BX	Denmark	DA
Bulgaria	BU	Djibouti (Formerly Afars & Issas)	DJ
Burkina Faso, Upper Volta	HV	Dominica	DO
Burma	BM	Dominican Republic	DR
Burundi	BY	Dronning Maud Land	NQ * (US)
Belarus	ВО	East Germany	GC * (GE)
Cambodia	СВ	East Timor	TR * (ID)
Cameroon	CM	Ecuador	EC
Canada	CA	Egypt	EG
<u>States</u> (Provinces of Canada)		El Salvador	ES
Alberta	AB	England	UK _

# Exhibit 4 – Country and State Code Standard Abbreviations

COUNTRY	CODE	COUNTRY	CODE
Equatorial Guinea	EK	Indian Ocean Terr. British	IB * ()
Eritrea	ER	Indonesia	ID Ü
Estonia	EN	Iran (Persia)	IR
Ethiopia	ET	Iraq	IZ
Europa Island	EU *	Iraq-Saudi Arabia,	IY * (NT)
European Communities	EE *	Neutral Zone	,
Faroe Is.	FO	Ireland	EI
Falkland Is. (Islas Malvinas)	FA	Isle of Man	IM * (UK)
Fiji	FJ	Israel	IS `
Finland	FI	Italy	IT
France	FR	Ivory Coast	IV
French Guiana	FG * (FR)	Jamaica	JM
French Polynesia	FP * (FR)	Jan Mayen	JN * (NO)
French Southern &	FS * (FR)	Japan	JA
Antarctic Lands		Jarvis Island	DQ * (NO)
French West Indies	FW *	Jersey	JE * (UK)
Gabon	GB	Jordan	JO
Gambia, The	GA	Juan De Nova Island	JU * (FR)
Gaza Strip	GZ * (PS)	Kampuchea	СВ
Georgia	GG	Kazakhstan	KZ
Germany & Berlin (East)	GC * (GE)	Kenya	KE
Germany	GE	Kingman Reef	KQ * (FR)
Ghana	GH	Kiribati Is.	KI
Gibraltar	GI	Korea, People's Republic (North)	KN
Gilbert Island	GS * (KI)	Korea, Republic of (South)	KS
Glorioso Islands	GO * ()	Kuwait	KU
Great Britain	UK	Kyrgyzstan	KG
Greece	GR	Laos	LA
Greenland	GL	Latvia	LG
Grenada	GJ	Lebanon	LE
Guadeloupe	GP * (FR)	Lesotho	LT
Guatemala	GT	Liberia	LI
Guenea	GV *	Libya	LY
Guernsey	GK * (UK)	Liechtenstein	LS
Guinea	GV	Line Is.	CL * (KI)
Guinea Bissau	GU	Lithuania	LH
Guyana	GY	Luxembourg (or Luxemburg)	LU
Haiti	HA	Macao	MC
Heard & McDonald Islands	HM * (AS)	Macedonia	MK
Holland	NL	Madagascar	MA * (MS)
Honduras	НО	Malagasy	MS
Hong Kong	HK	Malawi	MI
Howland Island	HQ * (UK)	Malaysia	MY
Hungary	HU	Maldives	MV
Iceland	IC	Mali	ML
India	IN	Malta	MT
Indian Ocean Area French	X9 * (FR)	Marshall Islands	MH -

# Exhibit 4 – Country and State Code Standard Abbreviations

COUNTRY	CODE	COUNTRY	CODE
Martinique	MB * (FR)	Myanmar, Burma	MQ
Mauritania	MR	Namibia (SW Africa)	WA
Mauritius	MP	Nauru	NR
Mayotte	MF * (FR)	Navassa Island	BQ * (US)
Mexico	MX	Nepal	NP
<u>States</u>		Netherlands (Antilles)	NA * (AE)
Aguascalientas	AG	Netherlands (Holland)	NL
Baja, Calif. (Terr. North)	BA	Neutral Zone, S Iraq/Arabia	NT
Baja Calif. (Terr. South)	BJ	New Caledonia	NC * (FR)
Campeche	CE	New Hebrides	NH * (VU)
Chiapas	CI	New Zealand	NZ
Chihuahua	CH	Nicaragua	NU
Coahuila de Zaragoza	CU	Niger	NG
Colima	CL	Nigeria	NI
Distrito Federal	DF	Niue	NE
Durango	DO	Norfolk Island	NF * (AS)
Guanajuato	GU	Norway	NO
Guerrero	GR	Oman (Muscat)	MU
Hidalgo	HL	Pakistan	PK
Jalisco	JL	Palau	PW
Mexico (State)	MX	Palestinian Autonomous Area	PS
Michoacan de Ocampo	MC	Panama	PN
Morelos	MR	Papua-New Guinea	PP
Nayarit	NA	Paracel Islands	PF *
Nuevo Leon	NL	Paraguay	PA
Oaxaca	OA	Peru	PE
Puebla	PB	Philippines	RP
Queretaro de Arteaga	QU	Pitcairn Island	PC * (UK)
Quintana Roo	QR	Poland	PL
San Luis Potosi	SL	Portugal	PO
Sinaloa	SI	Portuguese Timor	PT * (ID)
Sonora	SO	Qatar	QA
Tabasco	TB	Reunion	RE * ()
Tamaulipas	TA	Rhodesia (Zimbabwe)	RH * (ZI)
Tlaxcala	TL	Romania	RO
Veracruz-Llave	VC	Russia	RS
Yucatan	YU	Rwanda	RW
Zacatecas	ZA	San Marino	SM
Micronesia, Federated States	FM	Sana'a (Yemen)	YE * (YM)
Moldova	MD	Sao Tome & Principe	TP
Monaco	MN	Saudi Arabia	SA
Mongolia	MG	Scotland	UK
Montenegro	MJ	Senegal	SG
Montserrat	MH	Serbia	SJ
Morocco	MO	Seychelles	SE
Morocco (Spanish)	ME * (SP)	Sierra Leone	SL
Mozambique	MZ	Sikkim	SK * (IN)

# Exhibit 4 – Country and State Code Standard Abbreviations

COUNTRY	CODE	COUNTRY	CODE
Singapore Slovakia Slovenia Solomon Islands Somalia South Africa Soviet Union (USSR) Spain Spanish Sahara Spratley Islands Sri Lanka (Ceylon) St. Kitts & Nevis St. Helena St. Lucia St. Pierre & Miquelon St. Vincent & Grenadines Sudan Suriname Svalbard Swaziland Sweden Switzerland Syria Taiwan Tajikistan Tanzania Thailand Togo Tokelau Islands Tonga Trinidad & Tobago Tunisia Turkey Turkmenistan Turks & Caicos Is. Tuvalu (Ellice Is.) Uganda Ukraine Ukranian UK Indian Ocean Territory Union of Soviet Republics United Arab Emirates (UAE) (Trucial States) United Kingdom (England, Great Britain, Scotland, Wales) United Nations	SN SQ SI BP SO SF UR * SP SS * (SP) PG * CE SC SH ST SB * (FR) VC SW SZ SY TW TT TZ TH TO TL * (NZ) TN TD TS TU TX TK TV UG UP * UP UP UA * UP UP UP UP UP UP UP UP UP UP UP UP UP	United States Upper Volta Uruguay Uzbekistan Vanuatu Vatican City Venezuela Vietnam Vietnam (North) Virgin Islands (British) Wales Wallis & Futuna West Bank West Berlin West Germany West Indies French Western Sahara Western Samoa Yemen (Aden) (South) Yemen Republic of (Sana'a) Yemen (Sana'a) (North) Yugoslavia Zaire Zambia Zimbabwe Various (more than one)	US UV * (HV) UY UZ VU VT VE NM VN * (NM) VI UK WF * (FR) WB * (GE) GE XQ * (FR) WI WS YS * (YM) YM YE * (YM) YO ZR * (CG) ZA ZI XV

## Exhibit 4 (cont.) – United State Standard State Abbreviations

<u>STATE</u>	CODE
Alabama	AL
Alaska	AK
Arizona	AZ
Arkansas	AR
California	CA
Colorado	CO
Connecticut	CT
Delaware	DE
District of Columbia	DC
Florida	FL
Georgia	GA
Hawaii	H
Idaho	ID
Illinois	IL
Indiana	IN
lowa	IA
Kansas	KS
Kentucky	KY
Louisiana	LA
Maine	ME
Maryland	MD
Massachusetts	MA
Michigan	MI
Minnesota	MN
Mississippi	MS
Missouri	MO
Montana	MT
Nebraska	NE NY
Nevada	NV
New Hampshire	NH
New Jersey	NJ
New Mexico	NM
New York	NY
North Carolina	NC
North Dakota	ND
Ohio	OH
Oklahoma	OK
Oregon	OR
Pennsylvania	PA
Rhode Island	RI
South Carolina	SC
South Dakota	SD
Tennessee	TN
Texas	TX
Utah	Λ <u>τ</u>
Vermont	VT
Virginia	VA
Washington	WA

<u>STATE</u>	CODE
West Virginia Wisconsin Wyoming	WV WI WY
vvyorning	VVI

#### **U.S. TERRITORIES**

NAME	CODE
American Samoa Federated States of Micronesia	AS FM *
Guam Marshall Islands Northern Mariana Island	GU MH * MP
Palau Island Puerto Rico Virgin Islands	PW * PR VI

Note: The above Territories are considered <u>States</u> for CTRC processing. Code the Territory in the <u>State</u> field and 'US' in the <u>Country</u> field. Those Territories listed with an asterisk "\*" are for historical purposes only, and are now independent nations. Please continue to use the territorial codes for these former U.S. Territories.

## Exhibit 4 (cont.) - United State Zip Code Validation Table

The following table is used to validate all zip code fields. The table consists of the first three digits of the valid zip code range by state. Therefore, if a zip code falls within the given range for the state indicated, it is considered valid. Otherwise an error code will be issued. Consult the U.S. Postal Service Zip Code Directory to resolve any conflicts between state and zip codes.

<u>Code</u>	<u>State</u>	Zip Range	<u>Code</u>	<u>State</u>	Zip Range
AL	Alabama	350 – 369	OR	Oregon	970 - 979
AK	Alaska	995 – 999	PW	Palau Island	969 - 969
AS	American Samoa	967 - 967	PA	Pennsylvania	150 - 196
ΑZ	Arizona	850 – 865	PR	Puerto Rico	006- 009
AR	Arkansas	716 - 729 & 755	RI	Rhode Island	028 - 029
CA	California	900 - 966	SC	South Carolina	290 - 299
CO	Colorado	800 - 816	SD	South Dakota	570 - 577
CT	Connecticut	060 - 069	TN	Tennessee	370 - 385
DE	Delaware	197 - 199	TX	Texas	750 - 799 & 885
DC	District of Columbia	200 - 205	UT	Utah	840 - 847
FM	Federated States of	200 - 205	VT	Vermont	050 - 059
	Micronesia		VA	Virginia	220 - 246 & 201
FL	Florida	320 - 349 **	VI	Virgin Islands	008 - 008
GA	Georgia	300 - 319	WA	Washington	980 - 994
GU	Guam	969 - 969	WI	Wisconsin	530 - 549
HI	Hawaii	967 - 968	WV	West Virginia	247 - 268
ID	Idaho	832 - 838	WY	Wyoming	820 - 831
IL	Illinois	600 - 629		, 0	
IN	Indiana	460 - 479			
IA	Iowa	500 - 528	MILITA	ARY 'STATE'	
KS	Kansas	660 - 679			
KY	Kentucky	400 - 427	ΑE	Armed Forces Africa	090 -098
LA	Louisiana	700 - 714	AA	Armed Forces	340 -340
ME	Maine	039 - 049		Americas	
MH	Marshall Islands	969 - 969		(except Canada)	
MD	Maryland	206 - 219	ΑE	Armed Forces Canada	090 - 098
MA	Massachusetts	010 - 027 & 055	ΑE	Armed Forces Europe	090 - 098
MI	Michigan	480 - 499	ΑE	Armed Forces Middle	090 - 098
MN	Minnesota	550 - 567		East	
MS	Mississippi	386 - 397	AP	Armed Forces Pacific	962 - 966
MO	Missouri	630 - 658			
MT	Montana	590 - 599			
NE	Nebraska	680 - 693	** FL	- 343, 345, and 348 are no	ot valid.
NV	Nevada	889 - 898	*** NY	– Includes 004 Westches	ter and 063
NH	New Hampshire	030 - 038		Fishers Island	
NJ	New Jersey	070 - 089			
NM	New Mexico	870 - 884			
NY	New York	090 - 149 ***			
NC	North Carolina	269 - 289			
ND	North Dakota	580 - 588			
MP	Northern Mariana Is.	969 - 969			
OH	Ohio	430 - 458			
OK	Oklahoma	730 - 749			

# Exhibit 5 - Validation Edits/File Record Error Codes/Fatal Errors

Error Code	Error Source	Error Code	Error Source
F00	The Record Identification is invalid. The Transmittal Control Code, Employer Identification Code (TIN/EIN) and Location Code do	F30	There is no Location Summary (8A) Record on the file.
	not match the DCC files.	F31	There is no Casino Summary (8B) Record on the file.
F01	Non-numeric record counts were reported on the summary record.	F32	There is no File Summary (8Z) Record on the file.
F02	The number or records reported does not match the computer count for the Record Type 2A or Record Type 2A is not the second record on the file.	F33	The record was submitted as an Adjustment Record with a DCN but no original CTRC record was found.
F16	There is no Transmitter (1A) Record on the file.	F34	An invalid record type was present on the submitted file.
<b>5</b> 40		Transmitter I	Record
F19	The Location Summary Record Amounts do not equal the total of the Transaction Amounts.	T01	The Name in the Transmitter Record is blank.
F20	The File Summary Record Amounts do not equal the total of the Transaction Amounts.	T02	The Address in the Transmitter Record is blank.
F25	The number of records reported does not match the computer	T03	The City in the Transmitter Record is blank.
	count for the Transaction Summary Record Type 2B or Record Type 2B is not the third	T04	The State in the Transmitter Record is blank.
	record on the file.	T05	The Zip Code in the Transmitter Record is blank.
F26	The number of records reported does not match the computer count for the Foreign Currency Summary "2C" Record.	T06	The Area Code and/or Telephone Number in the Transmitter Record is blank.
F27	The number of records reported does not match the computer count for the Check "2D" Record.	T07	The Contact Name in the Transmitter Record is blank.
F28	The number of records reported does not match the computer	T08	The Coverage beginning date is blank or invalid.
	count for the Customer (Beneficiary - Part I) (2E) Record.	T09	The Coverage ending date is blank or more than 25 days from the coverage beginning date.
F29	The number of records reported does not match the computer count for the Conductor (Agent - Part II) (2F) Record.	Location Hea	

# Exhibit 5 - Validation Edits/File Record Error Codes/Fatal Errors

Error Cod	<u>e</u>	Error Source	Error Code	Error Source
L01		The Name of the Reviewer is blank.	C07	The Name/ID is incomplete in the Agent (2D) Record.
L02		The Title of the Reviewer is blank.	C11	The name in the Customer (2C) Record is invalid.
L03		The Area code or phone number is missing.	C12	The Address in the Customer (2C) Record is blank or incomplete due
L04		The Resolution code is missing or invalid.	a	to one of the following reasons:  The Street address is blank. The City is blank.
L05	a. b. c. d.	The Reviewer Date is invalid due to one of the following reasons: The Date is non-numeric. The Month is not a valid code between 01 and 12. The Day is not a valid code between 01 and 31. The Date is not less than the current date.	c	<ul> <li>The State is blank or it contains an invalid abbreviation if the country is equal to the U.S., Canada or Mexico.</li> <li>The Country Code is not a valid country abbreviation.</li> <li>The Zip Code is blank, zeroes, or invalid if the country is equal to the U.S.</li> </ul>
<u>Acknowle</u>		Returned on the nent "3R" Record	C13	The Method of Identification in the Customer (2C) Record is not a valid code or is incomplete.
C01	a. b.	The Name in the Agent (2D) Record is invalid due to one of the following reasons: The Name equals spaces, zeros or low values. The Name was not keyed in the	C16	The Customer's Account/Receipt Number is missing in the Transaction Summary (2B) Record.
	c.	proper format. The Name contains no slashes.	C17	The Name/Id is incomplete in the Customer (2C) Record.
C02	a. b. c.	The Address in the Agent (2D) Record is blank or incomplete due to one of the following reason: The Street Address is blank. The City is blank. The State is blank or invalid if equal to the U.S., Canada or Mexico. The Country is not a standard		The Nature of Transaction codes are missing or invalid in the Transaction Summary (2B) Record. A minimum of one of the following Nature of Transactions must be present:  1. 1-6 Transaction Cash In Codes 1.9 Transaction Cash Out Codes
	е.	abbreviation. The Zip Code is blank, zeroes, or invalid if the country is equal to the U.S.	C22	The Transaction Total Amounts of currency is invalid in the Transaction Summary (2B) Record due to one of the following reasons:
C03		The Method of Identification in the Agent (2D) Record is not a valid code or is incomplete.		a. The Amount is blank. b. The Amount is non-numeric.

# Exhibit 5 - Validation Edits/File Record Error Codes/Fatal Errors

Error Code	Error Source	Error Code	Error Source
C24	The Transaction Date is blank or invalid in the Transaction Summary (2B) Record due to one	f.	The Date is not less than the current date.
a. b.	of the following reasons: The Date is not numeric. The Month is not a valid code between 01 and 12.	V43 a.	Transaction Summary (2B) Record.
c. d.	The Day is not a valid code between 01 and 31. The Date is not less than the	b.	The Approval Date in the Location Header (2A) Record.
	current date.	V44	The Recorder/Handler's Title is missing in the Transaction
C26	The SSN (TIN) in the Agent (2D) Record is invalid, or the SSN is equal to spaces, zeros or is non-	V46	Summary (2B) Record.  The Signature Dates are missing
	numeric.	V 10	or invalid due to one of the following reasons:
C27	The SSN does not match our file as a valid SSN for the Name shown in the Agent (2D) Record.	a.	The Date Prepared in the Transaction Summary (2B) Record.
C28	The Identifying EIN/SSN in the	b.	The Approval Date in the Location Header (2A) is invalid.
	Customer (2C) Record is an invalid number, contains all zeroes or is equal to all 9's.	V54	The Transaction Total Amount in the Transaction Summary (2B) Record are missing or invalid due
C29	The Name in the Customer (2C) Record does not match the EIN/SSN in the DCC files.	a. b.	
C32	The Recorder/Handler or Reviewer Names are missing due to one of	V64	The Transaction Date in the Transaction Summary Record is missing or invalid due to one of
a.	the following reasons: The Recorder/Handler 's name in the Transaction Summary (2B)	a.	the following reasons: The Date is not numeric.
b.	Record is missing. The Reviewer's name is blank in the Location Header (2A) Record.	b. c.	between 01 and 12.
C33	The Dates are missing or invalid: The Date prepared in the	d.	between 01 and 31. The Date is not less than the current date.
L	Transaction Summary (2B) Record.	V82	The Country Code in the Foreign
b. c.	The Review Date in the Location Header (2A) Record. The Date is not numeric.		Currency Transaction Summary (2B) Record is not a valid Country Code.
d.	The Month is not a valid number between 01 and 12.		oud.
e.	The Day is not a valid number between 01 and 31.		

#### Exhibit 6 - Most Commonly Asked Questions and Answers

- Q. What code do we use for a location code in records?
- DCC will assign a location code to every casino location filing magnetically.
   Although most casinos have only one location per EIN (TIN), some casinos have multiple locations.
- Q. If an error is identified in the Location "2A" records, will DCC still validate subsequent Location records?
- A. Yes, if there are other location records we will continue validation. However, each location within the erroneous group will contain the location error. This entire group must be corrected and resubmitted.
- Q. If we must begin each file with a Transaction Sequence Number starting with 00001 for each "2B" record, how are we to match the acknowledgment records with the right submission and sequence?
- A In the Transmitter Record "1A", the coverage beginning or ending dates should be considered with the sequence numbers so that each submission is unique. This record will be returned to you on the acknowledgment file for this purpose.
- Q. During the acceptance test, are you planning to return an acknowledgment file?
- A. Yes, we will acknowledge your test file but do not require that it be corrected and resubmitted if it contains errors. We do recommend that you use it to test your internal error programs.
- Q. On the Declaration Statement under Test Submission, Item 2 there is a blank for a test submission date. How will this affect my status if I do not make this date?
- A. This does not affect your status at all; it is a planning date for DCC so we can estimate monthly input volumes. If the estimated date passes, we will contact you for your next best estimate.
- Q. Suppose I apply to file magnetically and for some reason wish to drop out of the program, can I do so?
- A. Yes. We want to be able to address the community's concerns. Therefore, if you

- decide to drop out, you must notify the Magnetic Filing Coordinator in writing of the date you wish to resume paper filing, giving the reasons for dropping out. Once this written notice is sent, you can immediately resume paper filing.
- Q. What can I do if my organization/casino takes exception to certain phrases in the Declaration Statement, which prevents us from participating?
- A. If the agreement contains phrases or statements, which prevent your organization/casino from filing, line through the phrase and submit the proposed changes to the CTRC Magnetic Media Coordinator for consideration.
- Q. The Amount of Transaction on the "2B"
  Record is in whole dollars. If I have a transaction for \$10,000.01, which is reportable, will you reject this transaction?
- A. We will not reject your transactions nor note the field in error. Any transaction amount can be reported via magnetic media as long as the amount is greater than zero.
- Q. The Standard Abbreviation Table in Attachment 2 is difficult to enforce. How exact do we have to be?
- A. This table is preferred, not mandatory.
- Q. Are the Standard Country and State Abbreviations mandatory?
- A. Yes. This table is mandatory.
- Q. In the general specifications, is the record format fixed or variable length?
- A. The record format and the block size are fixed lengths.